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CENTRAL FAX CENTER****FEB 28 2007****FAX TRANSMISSION****DATE:** February 28, 2007**PTO IDENTIFIER:** Application Number 10/567,746
Patent Number**Inventor:** Lutz Freitag**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** PATTON BOGGS LLP

Michele V. Frank

PHONE: (703) 744-8000**Attorney Dkt. #:** 023189.0101P2US**PAGES (Including Cover Sheet):** 4**CONTENTS:** Transmittal (1 page)
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/567,746
		Filing Date	February 10, 2006
		First Named Inventor	Lutz Freitag
		Art Unit	N/A
		Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	2	Attorney Docket Number	023189.0101P2US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	PATTON BOGGS LLP		
Signature			
Printed name	Michele V. Frank		
Date	February 28, 2007	Reg. No.	37,028

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FEB 28 2007

Docket No.: 023189.0101P2US
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Lutz Freitag

Application No.: 10/567,746

Confirmation No.: N/A

Filed: February 10, 2006

Art Unit: N/A

For: METHOD AND ARRANGEMENT FOR
RESPIRATORY SUPPORT FOR A PATIENT
AIRWAY PROSTHESIS AND CATHETER

Examiner: Not Yet Assigned

STATUS INQUIRY

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450


Dear Sir:

It is respectfully requested that the attorney named below be advised of the status of the above-identified application. Please advise us of when we might expect to receive a Filing Receipt/371 Acceptance from the Patent and Trademark Office.

Applicant believes no fee is due with this response. However, if a fee is due, please charge our Deposit Account No. 50-2228, under Order No. 023189.0101P2US from which the undersigned is authorized to draw.

Dated: February 28, 2007

Respectfully submitted,

By 
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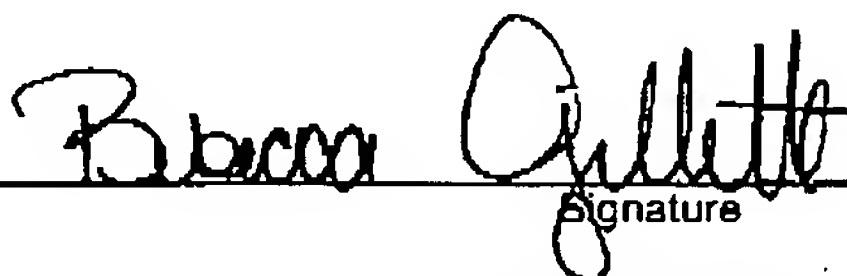
Application No. (if known): 10/567,746

Attorney Docket No.: 023189.0101P2US

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